

# MSAE Connector Application

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

## Please answer the following questions.

1. *How many years have you been an MSAE member?*

Years \_\_\_\_\_

2. *Member type:*

Association \_\_\_\_\_ Allied \_\_\_\_\_

3. *Why do you want to be a connector?*

\_\_\_\_\_

\_\_\_\_\_

4. *What would you like to get out of this experience?*

\_\_\_\_\_

\_\_\_\_\_

5. *What type of new member would you like to connect with?*

Association \_\_\_\_\_ Allied \_\_\_\_\_

## Connector Pledge

I agree to serve as a Connector for MSAE. I will encourage and promote the values and benefits of membership by welcoming new members into MSAE and acting as a resource on their behalf. I understand my commitment to serve is one year and this is not to promote myself or organization.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please Return Application to:**

Midwest Society of Association Executives  
1970 Oakcrest Avenue, Suite 100  
Roseville, MN 55113

Fax: 651-647-6388

Phone: 651-647-6388

**If you have questions please contact:**

Angela Skotterud, MSAE  
Phone: 651-647-6388  
Email: [online@msae.com](mailto:online@msae.com)



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**DIFFERENCE**